

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND										
1 Date of Request: <u>3/24/05</u>		2 Serial/Patent # <u>09083233</u>								
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT						
<input type="checkbox"/>	Filing			\$						
<input type="checkbox"/>	Amendment			\$						
<input type="checkbox"/>	Extension of Time			\$						
<input type="checkbox"/>	Notice of Appeal/Appeal			\$						
<input checked="" type="checkbox"/>	Petition	<u>Ret. OP</u>	<u>3/18/05</u>	<u>\$2290.00</u>						
<input type="checkbox"/>	Issue			\$						
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$						
<input type="checkbox"/>	Maintenance			\$						
<input type="checkbox"/>	Assignment			\$						
<input type="checkbox"/>	Other			\$						
		7 TOTAL AMOUNT OF REFUND		<u>\$2290.00</u>						
		8 TO BE REFUNDED BY:								
10 REASON:		<input checked="" type="checkbox"/>	<u>Treasury Check CC</u>							
<input checked="" type="checkbox"/>	Overpayment	<input type="checkbox"/>	Credit Deposit A/C #:							
<input checked="" type="checkbox"/>	Duplicate Payment	9 <table border="1"><tr><td></td><td></td><td>--</td><td></td><td></td><td></td></tr></table>					--			
		--								
<input type="checkbox"/>	No Fee Due (Explanation):									
11 REFUND REQUESTED BY:										
TYPED/PRINTED NAME: <u>Liana Chase</u>		TITLE: <u>Paralegal</u>								
SIGNATURE: <u>Liana Chase</u>		PHONE: <u>272-3200</u>								
OFFICE: <u>Petitions</u>										

THIS SPACE RESERVED FOR FINANCE USE ONLY:										
APPROVED: <u>Alisa Kelle</u>		DATE: <u>3/25/05</u>								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B